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March 17, 2017

TO:

Gary M. Moore, Administrator

Division of Family and Children's Services

FROM:

Elke-Shaw Tulloch, Administrator &

Division of Public Health

SUBJECT:

Idaho MIECHV Steering and Infant Toddler Program Interagency Agreement

Attached for your review is the Interagency Agreement (IAG) between the Maternal, Infant and Early Childhood Home Visiting (MIECHV) program and the Infant Toddler Program (ITP). The IAG supports MIECHV's ongoing grant requirements in ensuring a seamless continuity of care for very young children and their families. Idaho MIECHV is required to refer families that screen positive for further assessment on developmental and social emotional screeners to ITP. In turn, ITP often identifies families that may not qualify for their services but do qualify for MIECHV. In some instances a family is in need of services from both programs.

The IAG intends to solidify clear and consistent protocol between MIECHV and ITP in the following ways:

- 1. Establishes common definitions
- 2. Solidifies a clear referral protocol
- 3. Provides consistent guidance on serving families enrolled in both programs
- 4. Creates opportunities to consolidate resources in order to maximize funding

If this meets with your approval, please sign the application and return to our office for processing. Please feel free to contact Jacquie Watson, Program Manager, Maternal and Child Health Programs, at ext. 45963 if you have any questions.

Thank you.

EST/dp

Attachment

INTERAGENCY AGREEMENT DEPARTMENT OF HEALTH AND WELFARE INFANT TODDLER PROGRAM AND MATERNAL, INFANT, EARLY CHILDHOOD HOME VISITING PROGRAM

This agreement is between the Infant Toddler Program (ITP) of the Idaho Department of Health and Welfare, the lead agency for Part C early intervention services for children birth to three years, and Maternal, Infant, Early Childhood Home Visiting Program (MIECHV) of the Idaho Department of Health and Welfare.

Purpose/Philosophy

We are committed to working together to develop strong partnerships between families, the Maternal, Infant, Early Childhood Home Visiting Program and its sub-recipients, and the Infant Toddler Program to nurture children's growth and development in their natural environments. We will strive to increase quality, consistency, and variety of options for early intervention and work together within agencies to pool our resources toward this effort.

Definitions

Confidentiality:

No identifiable information will be shared without the written consent of the child's parent/guardian for each exchange of information.

Screening:

A quick determination of the need for further evaluation of a child's development.

Evaluation:

A process to determine program eligibility. It includes direct testing through the use of standardized instruments, observation, and parent interview.

Assessment:

A process to identify family and child strengths and needs. The information is used to develop individualized service plans. This may include observations, screenings, and criterion referenced instruments.

Referral:

A structured contact to provide eligibility and services information, to obtain parental consent to begin the process of gathering appropriate information, and to assist families to access services.

Exchange of Information

Confidential information about children will be exchanged between agencies according to HIPAA and FERPA regulations and agency protocols for each exchange of personally identifiable information with ITP using the DHW Authorization for Disclosure form and MIECHV using the MIECHV Consent for Release of Information form.

Responsibilities for each Program

The Infant Toddler Program will:

- Provide early intervention services in natural environments to all eligible children birth to three
 who have a developmental delay or disability or conditions with a high probability of resulting in
 a delay according to the provisions of IDEA, Part C.
- Provide service coordination for all eligible infants and toddlers including transition planning.
- Assure services are provided in the native language used in home: will provide interpreters for early intervention services and for ITP/MIECHV joint meetings for children birth to 24 months, depending on the purpose and assigned fiscal responsibility.
- Conduct outreach, screening and other Child Find activities coordinated with MIECHV subrecipients.
- Be available to consult with MIECHV regarding concerns about children dually enrolled in both programs.
- Have open communication between agency staff related to children who have been referred or are dually enrolled.
- Routinely make information available to families about MIECHV and its subrecipients, ITP, and community resources as appropriate.
- Have open communication and periodic review meetings
- ITP will maintain an on-line developmental monitoring system for children birth to three using Ages and Stages Questionnaires, ASQ-SE, and MCHAT.
- Provide aggregate data, by MIECHV subrecipient, of the number of referrals directly received from MIECHV sub-recipients, the number of completed referrals, and the number of referred children that qualified for the program.
- Provide aggregate data, by MIECHV subrecipient, of the number of referrals directly received
 from MIECHV sub-recipients that were not completed and reasons, and the number of referred
 children that did not qualify for the program and reasons. Coordinate with MIECHV
 subrecipients in providing referrals for other resources, as appropriate, when children do not
 qualify for ITP services.

Maternal, Infant, Early Childhood Home Visiting Program will:

- Provide MIECVH services to legislatively identified priority populations who:
 - Have low incomes
 - Are pregnant women who have not attained age 21

- Have a history of child abuse or neglect or have had interactions with child welfare services
- Have a history of substance abuse or need substance abuse treatment
- Are users of tobacco products in the home
- O Had or have a child/children with low student achievement
- o Have a child/children with developmental delays or disabilities
- Are in families that include individuals who are serving or formerly served in the Armed Forces, including such families that have members of the Armed Forces who have had multiple deployments outside of the United States
- o Families experiencing homelessness as defined by the McKinney-Vento Act
- Complete developmental and behavioral screening using the ASQ and ASQ: SE, or other
 appropriate screening and assessment tools within six months of age for children enrolled at
 birth, or within six months of program participation for children who are older than one month
 at enrollment.
- MIECHV will:
 - o Track delivery of services to children in their program,
 - o Be available to consult with ITP staff regarding dually enrolled children,
 - o Have open communication with ITP staff regarding dually enrolled children,
 - Routinely make information available, when appropriate, as a resource to families served by MIECHV, and
 - Support MIECHV subrecipients in coordinating with ITP staff in identifying resources and providing referrals, as appropriate, when a referred child does not quality for ITP.

Referrals

The Infant Toddler Program will:

- With parent permission, make written referrals to MIECHV subrecipients as appropriate for children referred or currently involved in ITP.
- Make Developmental Milestones available for consultation regarding parent concerns, monitoring status, and the need for referral to ITP.

Maternal, Infant, Early Childhood Home Visiting Program will:

 Obtain parent permission and make referral to ITP within two working days of identification of a concern (ASQ cutoff scores, monitoring status, or parent identified concerns) related to the child's development.

Evaluation and IFSP Development

The Infant Toddler Program will:

Provide timely evaluations; and eligibility determination for referred children.

- With parent permission, extend invitations to all providers to participate in Individualized Family Service Plan (IFSP) activities (initial, six month, and annual reviews) and MIECHV subrecipient meetings addressing developmental concerns.
- With parent permission for dually served children, provide copies of evaluations and the IFSP to MIECHV subrecipients.

Maternal, Infant, Early Childhood Home Visiting Program will:

- With permission from parents or other legal caregivers, provide timely screening information in writing to ITP staff to assist with evaluation process.
- Confer with ITP to review evaluation results, eligibility determination, and child outcomes determinations.
- Participate in IFSP development for dually served children, with parental permission.
- With parental permission, provide ITP with a copy of the family goals for dually enrolled children.

<u>Infant Toddler Program and Maternal, Infant, Early Childhood Home Visiting Program both agree to:</u>

Joint Staffing

- Staff will engage in joint planning and progress review every six months or more frequently as needed, on mutually served children and families to ensure services and supports are provided in a manner that minimizes duplication and intrusion on the family.
- Share pertinent written information (e.g. IFSPs, progress reports, evaluations, assessments, developmental screening, family goals, etc.).

Shared Training

- Upon request, provide training to staff on what services the agencies provide for children and families, how services can be delivered, and how to make referrals.
- Complete annual review with staff regarding the contents of this agreement.
- Routinely share information about training opportunities for staff and parents.
- Upon agreement, collaborate to provide joint staff training on screening instruments and techniques, and share in other training opportunities that support best practice service delivery.
- Provide training for procedures to be followed when children are involved in child welfare services (child protection, foster care) to assure appropriate participation by biological and foster parents.

Resource Sharing/Service Delivery

- Make materials (books, videos) and expertise available whenever possible.
- Provide cooperative support to children and families mutually served as needed and in accordance with their IFSP and family goals. Supports may be provided in family homes and/or MIECHV subrecipient hosted playgroups as appropriate.

The provisions of this agreement may be extended, modified, or changed upon a written amendment signed by both parties, and such amendment when so signed, will become a part of this agreement. This agreement becomes effective on the date signed by all parties. The agreement is automatically renewed on July 1 of each year unless either party requests a review of the agreement prior to June 1. Either party may terminate this agreement with a 30 day notice to the other party.

Elke Shaw-Tulloch, Administrator Division of Public Health

Gary Moore, Administrator

Division of Family & Community Services

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